City of Nashua • Division of Public Health & Community Services

Environmental Health Department

18 Mulberry Street, Nashua, NH 03060 phone: 603-589-4530 fax: 603-589-4539



Intent to Hold a Farmers' Market Form

Form must be submitted THREE WEEKS prior to beginning date of each Farmers' Markets. For on-going Farmers Markets, new vendors must be added a minimum of two week prior to the beginning of month of participation if added after the initial start date.

Name of Farmers'	Dates of		
Market:	Farmers' Market:		
Location of	Start Time:		
Farmers' Market:	End Time:		
Name(s) of			
Farmers' Market			
Organizer(s):			
Mailing Address:			
Phone Number:	City/State/Zip:		
Email Address:	Cell Phone:		
Organizer must attach letter of agreement from facility providing rest rooms.			
Location of rest rooms for patrons:			
Organizer must list contact information and all products	FOOD and NON-FOOD to be sold or distributed		
Organizer must list contact information and all products, FOOD and NON-FOOD, to be sold or distributed. Please attach additional pages, as needed.			
Name of Farmers'			
Market Vendor:			
Mailing Address:			
Phone Number:	City/State/Zip:		
Email Address:	Cell Phone:		
Products:			
Name of Farmers'			
Market Vendor:			
Mailing Address:			
Phone Number:	City/State/Zip:		
Email Address:	Cell Phone:		
Products:			
Name of Farmers'			
Market Vendor:			
Mailing Address:			
Phone Number:	City/State/Zip:		
Email Address:	Cell Phone:		
Products:			

Name of Farmers'			
Market Vendor:			
Mailing Address:			
Phone Number:	City/State/Z	ip:	
Email Address:	Cell Phone:	-	
Products:	'		
Name of Farmers' Market Vendor:			
Mailing Address:			
Phone Number:	City/State/Z	in:	
Email Address:	Cell Phone:	-t.	
Products:			
Name of Farmers' Market Vendor:			
Mailing Address:			
Phone Number:	City/State/Z	ip:	
Email Address:	Cell Phone:	r	
Products:			
Name of Farmers' Market Vendor:			
Mailing Address:			
Phone Number:	City/State/Z	ip:	
Email Address:	Cell Phone:	Cell Phone:	
Products:			
By signing this application, I do hereby agree to comply with the rules and regulations as outlined in this application, the accompanying guidance document, Farmers' Market Licensed Vendor Requirement Checklist, and with any additional instructions. I understand that only the foods listed may be sold or distributed. Failure to comply with this and all other requirements may result in a license not being issued, or having a license revoked, or rescinding approval of the Farmers' Market.			
Organizer's Signature: Date:			
Organizer's Signature: Date: Date:			
Date received:	Rest room agreement included?	EH Initials:	

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